PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 NOV -5 PM 1:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000005001

1. Corporation Name

ST. JAMES PRIMITIVE BAPTIST CHURCH OF MULBERRY, INC.

Principal Office Address	Mailing Address
904 SE 4th Street Mulberry, FL 33860	Same

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 99

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 8/24/98

5. FEI Number: 59-2856266 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☒

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Willie C. Brooks	5123 Fairfax East	Lakeland, FL 33813
D	Noel Denmark	1328 W. Honeytree Lane	Lakeland, FL 33810
D	Edwin C. Brooks	706 SE 3rd Street	Mulberry, FL 33860
D	Otis Bell	3540 Willis Road	Mulberry, FL 33860
D	Walter H. Walker	2315 1st Street	Mulberry, FL 33860 LS
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8. Name and Address of Current Registered Agent

Willie C. Brooks
5123 Fairfax East
Lakeland, FL 33813

9. Name and Address of New Registered Agent 236.25

Name

Street Address (P.O. Box Number is Not Acceptable)

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Suite, Apt. #, Etc.

City ******8.75 FL Zip Code 75

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Willie C. Brooks — Date: 10/27/99
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Willie C. Brooks — 10/27/99 — (941)647-5754
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Willie C. Brooks